### Case 16-41936-pwb Doc 1 Filed 08/19/16 Entered 08/19/16 13:40:39 Desc Main Document Page 1 of 53

Fill in this information to identify your c	ase:	
United States Bankruptcy Court for the: NORTHERN DISTRICT OF GEORGIA		
Case number (if known):	Chapter you are filing under:  Chapter 7 Chapter 11 Chapter 12 Chapter 13	☐ Check if this is an amended filing

#### Official Form 101

#### **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together--called a joint case--and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Identify Yourself

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example,	Angel First Name	First Name
	your driver's license or passport).	Romeo Middle Name	Middle Name
		Salmon	
	Bring your picture identification to your meeting	Last Name	Last Name
	with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2.	All other names you		
	have used in the last 8 years	First Name	First Name
	Include your married or	Middle Name	Middle Name
	maiden names.	Last Name	Last Name
3.	Only the last 4 digits of		
J.	your Social Security	xxx - xx - 3 3 0 9	xxx - xx
	number or federal Individual Taxpayer	OR	OR
	Identification number	9xx - xx -	9xx - xx -

(ITIN)

## Case 16-41936-pwb Doc 1 Filed 08/19/16 Entered 08/19/16 13:40:39 Desc Main Document Page 2 of 53

Debtor 1 Angel First Name			Romeo Salmon C Middle Name Last Name		Cas	Case number (if known)			
			About Deb			About Debtor 2	2 (Spouse Only in a Joint Case):		
4.	and Employer		<b>☑</b> I have	e not used any business names or	EINs.		used any business names or EINs.		
	(EIN) y	ication Numbers ou have used in	Business nar	me		Business name			
	Include	et 8 years e trade names and	Business nar	me		Business name			
	doing b	ousiness as names	Business nar	me		Business name			
			EIN -	·	_				
			<u></u>	·					
5.	Where	you live				If Debtor 2 lives	s at a different address:		
			240 King	St. North, Unit 11					
				Street		Number Street			
			-						
			Calhoun	GA 30701					
			City	State ZIP Code		City	State ZIP Code		
			Gordon			Ozverte			
			County			County			
			the one ab	iling address is different from love, fill it in here. Note that the lend any notices to you at this dress.		from yours, fill	ailing address is different it in here. Note that the court stices to you at this mailing		
			Number S	Street		Number Street			
			P.O. Box			P.O. Box			
			City	State ZIP Code		City	State ZIP Code		
6.		ou are choosing strict to file for	Check one	:		Check one:			
	bankrı		petitio	the last 180 days before filing this on, I have lived in this district longe n any other district.		petition, I h	ast 180 days before filing this nave lived in this district longer other district.		
				another reason. Explain. 28 U.S.C. § 1408.)			ther reason. Explain. S.C. § 1408.)		
P	art 2:	Tell the Court	About Your B	ankruptcy Case					
7.		napter of the uptcy Code you		(For a brief description of each, so cy (Form 2010)). Also, go to the to			U.S.C. § 342(b) for Individuals Filing he appropriate box.		
	are ch under	oosing to file	☐ Chapter	r 7					
			☐ Chapter	r 11					
			☐ Chapter	r 12					
			— Chapte	r 13					

## Case 16-41936-pwb Doc 1 Filed 08/19/16 Entered 08/19/16 13:40:39 Desc Main Document Page 3 of 53

Deb	tor 1 Angel	Romeo	Salmon	Case number (if	f known)		
	First Name	Middle Name	Last Name	(	· /		
8.	How you will pay the fee	court for pay with behalf, y	when the entire fee when I file my per more details about how you may p cash, cashier's check, or money or our attorney may pay with a credit	ay. Typically, if yorder. If your attorn card or check with	ou are paying ney is submitti a a pre-printed	the fee yoursel ng your payme address.	f, you may nt on your
			o pay the fee in installments. If your stalling fee in Installing	•	_	attach the App	ication for
		By law, a than 150 fee in ins	t that my fee be waived (You may a judge may, but is not required to, % of the official poverty line that a stallments). If you choose this opti- e Waived (Official Form 103B) and	waive your fee, ar pplies to your fami on, you must fill ou	nd may do so oily size and yout the Applicat	only if your inco	ome is less pay the
9.	Have you filed for	<b>⋈</b> No					
	bankruptcy within the last 8 years?	Yes.					
		District		When	Ca	ase number	
		District		When	DD / YYYY	ase number	
		District		When	Ca	ase number	
10.	Are any bankruptcy cases pending or being	<b>☑</b> No					
	filed by a spouse who is	Yes.					
	not filing this case with you, or by a business	Debtor		F	Relationship to	o you	
	partner, or by an affiliate?	District			DD / YYYY if k	ase number, known	
		Debtor		F	Relationship to	o you	
		District		When		ase number,	
11.	Do you rent your residence?	Yes. Ha	o to line 12. as your landlord obtained an eviction sidence?				ay in your
			<ul><li>No. Go to line 12.</li><li>Yes. Fill out Initial Statement A and file it with this bankruptcy p</li></ul>		udgment Aga	inst You (Form	101A)

## Case 16-41936-pwb Doc 1 Filed 08/19/16 Entered 08/19/16 13:40:39 Desc Main Document Page 4 of 53

Deb	otor 1	Angel First Name	Romeo Middle Na		Salmon Last Name	Case number (if known)
P	art 3:	•			sses You Own as a	a Sole Proprietor
12.	-	u a sole proprietor full- or part-time ss?			Go to Part 4. Name and location of b	business
	busines individu separat	oroprietorship is a ss you operate as an ial, and is not a e legal entity such as ration, partnership, or			Name of business, if any  Number Street	
	If you h sole pro separat to this p			Health Care Busin	State ZIP Code  e box to describe your business:  iness (as defined in 11 U.S.C. § 101(27A))  al Estate (as defined in 11 U.S.C. § 101(51B))	
					_	defined in 11 U.S.C. § 101(53A)) ter (as defined in 11 U.S.C. § 101(6)) ter (as defined in 11 U.S.C. § 101(6))
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business		can s most	set ap	propriate deadlines. If you balance sheet, statem	the court must know whether you are a small business debtor so that it you indicate that you are a small business debtor, you must attach your ment of operations, cash-flow statement, and federal income tax return not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
	debtor?		No.	I am not filing under C	Chapter 11.	
		For a definition of small		No.	I am filing under Chapt the Bankruptcy Code.	oter 11, but I am NOT a small business debtor according to the definition in
	business debtor, see 11 U.S.C. § 101(51D).			Yes.	I am filing under Chap Bankruptcy Code.	oter 11 and I am a small business debtor according to the definition in the
P	art 4:	Report If You (	Own or	Hav	e Any Hazardous F	Property or Any Property That Needs Immediate Attention
14.	propert alleged immine	own or have any ty that poses or is to pose a threat of ent and identifiable to public health or		No Yes.	What is the hazard?	
	safety? any pro	Or do you own operty that needs iate attention?			If immediate attention	is needed, why is it needed?
	perisha livestoc	ample, do you own ble goods, or ok that must be fed, or ng that needs urgent			Where is the property?	? Number Street
	ropairs	•				<del></del>
						City State 7IP Code

### Case 16-41936-pwb Doc 1 Filed 08/19/16 Entered 08/19/16 13:40:39 Desc Main Document Page 5 of 53

Debtor 1 Angel Romeo Salmon Case number (if known) Last Name

#### **Explain Your Efforts to Receive a Briefing About Credit Counseling**

15. Tell the court whether you have received briefing about credit counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again. You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

**About Debtor 1:** 

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days

for cause and is i	imited to a maximum of 15 days.
☐ I am not required credit counselin	d to receive a briefing about g because of:
☐ Incapacity.	I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.
☐ Disability.	My physical disability causes me

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

**About Debtor 2 (Spouse Only in a Joint Case):** *You must check one:* 

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about	Ċ
credit counseling because of:	

Incapacity.	I have a mental illness or a mental
_	deficiency that makes me
	incapable of realizing or making
	rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

## Case 16-41936-pwb Doc 1 Filed 08/19/16 Entered 08/19/16 13:40:39 Desc Main Document Page 6 of 53

Deb	otor 1	Angel First Name	Rome Middle N		Salmon Last Name		Case number (if	know	n)	
P	art 6:	Answer These	Quest	ions	for Reporting P	urpos	es			
16.	What k have?	ind of debts do you	16a		Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."  No. Go to line 16b.  Yes. Go to line 17.					
			16b		•	r invest	iness debts? Business debt ment or through the operation		debts that you incurred to obtain e business or investment.	
			16c	. Sta	te the type of debts	you owe	e that are not consumer or bus	siness	s debts.	
17.	Are you	u filing under r 7?	abla	No.	I am not filing unde	er Chap	ter 7. Go to line 18.			
	any exc	Do you estimate that after any exempt property is excluded and administrative expenses		Yes.	•		•	-	xempt property is excluded and to distribute to unsecured creditors?	
	are pai availab	d that funds will be le for distribution ecured creditors?			☐ Yes					
18.		any creditors do timate that you		1-49 50-99 100-1 200-9	199		1,000-5,000 5,001-10,000 10,001-25,000		25,001-50,000 50,001-100,000 More than 100,000	
19.		uch do you te your assets to th?		\$50,0 \$100	50,000 001-\$100,000 ,001-\$500,000 ,001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion	
20.		uch do you te your liabilities to		\$50,0 \$100	50,000 001-\$100,000 ,001-\$500,000 ,001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion	

## Case 16-41936-pwb Doc 1 Filed 08/19/16 Entered 08/19/16 13:40:39 Desc Main Document Page 7 of 53

Debtor 1	Angel	Romeo	Salmon	Case number (if known)					
	First Name	Middle Name	Last Name						
Part 7:	Sign Below								
For you		I have examined this petition, and I declare under penalty of perjury that the information and correct.							
		If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.							
			•	not pay or agree to pay someone who is not an attorney to help me and read the notice required by 11 U.S.C. § 342(b).					
		I request relie	I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.						
		connection w	-	t, concealing property, or obtaining money or property by fraud in result in fines up to \$250,000, or imprisonment for up to 20 years, 9, and 3571.					
			I Romeo Salmon meo Salmon, Debtor 1	X Signature of Debtor 2					
		Executed	on <u>08/19/2016</u> MM / DD / YYYY	Executed on MM / DD / YYYY					

# Case 16-41936-pwb Doc 1 Filed 08/19/16 Entered 08/19/16 13:40:39 Desc Main Document Page 8 of 53

Debtor 1	Angel First Name	Romeo Middle Name	Salmon Last Name	Case number (if kno	own)	_
For your attorney, if you are represented by one  If you are not represented by an attorney, you do not need to file this page.		eligibility to pro relief available the debtor(s) the	oceed under Chapter 7 e under each chapter fo he notice required by 1	or which the person is eligible. I a	States Code, and have explained the also certify that I have delivered to	
		X /s/ Matthe Signature of	ew T. Berry of Attorney for Debtor	Dat	te 08/19/2016 MM / DD / YYYY	
		Matthew				
		Printed nar	ne Associates			
		Firm Name	)			-
		2751 Bufe Number	ord Hwy Street			_
		Suite 600	1			
		Atlanta		GA	30324	
		City		State	ZIP Code	
		Contact ph	one (404) 235-3300	Email address mbe	erry@mattberry.com	_
		055663				
		Bar numbe	r	State	<del></del>	

## Case 16-41936-pwb Doc 1 Filed 08/19/16 Entered 08/19/16 13:40:39 Desc Main Document Page 9 of 53

Fill in this in	formation to i	dentify your case	and this filing:		
Debtor 1	Angel First Name	Romeo Middle Name	Salmon Last Name		
Debtor 2	) <del>-</del>	ACLU AL			
(Spouse, if filing)		Middle Name	Last Name		
	ankruptcy Court fo	r the: NORTHERN D	ISTRICT OF GEORGIA		
Case number (if known)					if this is an ded filing
Official Form	n 106A/B				
Schedule A	/B: Property	у			12/15
filing together, be sheet to this form Part 1: De	oth are equally rent on the top of a	esponsible for supplying additional pages,	e as complete and accurate a ing correct information. If mo write your name and case nu ing, Land, or Other Real I	re space is needed, attach a mber (if known). Answer eve	separate ery question.
□ No. Go	to Part 2. here is the proper	·	many residence, sunding, id	ma, or similar property.	
1.1. 240 King St N U Calhoun, A 307		Check all	ne property? that apply. e-family home	Do not deduct secured cla amount of any secured cla Creditors Who Have Clain	
Condominium	01	Duple	x or multi-unit building ominium or cooperative	Current value of the entire property?	Current value of the portion you own?
		Manu	factured or mobile home	\$90,000.00	\$90,000.00
County		ш.		Describe the nature of you interest (such as fee sim entireties, or a life estate	ple, tenancy by the
			an interest in the property?	Ownership Subject to	Lien
		Debto	e. or 1 only or 2 only or 1 and Debtor 2 only st one of the debtors and anoth	Check if this is comm (see instructions)	nunity property
			ormation you wish to add aboidentification number:	ut this item, such as local	_
	-	•	of your entries from Part 1, in ite that number here	- · ·	\$90,000.00
Part 2: De	escribe Your V	/ehicles			
		•	n any vehicles, whether they a also report it on Schedule G: Ex	_	•

 ${\bf 3.} \quad {\bf Cars, vans, trucks, tractors, sport utility vehicles, motorcycles}$ 

✓ No ☐ Yes

## Case 16-41936-pwb Doc 1 Filed 08/19/16 Entered 08/19/16 13:40:39 Desc Main Document Page 10 of 53

Deb	tor 1	Angel First Name	Romeo Middle Name	Salmon Last Name	Case number (if known)	
4.					hicles, other vehicles, and accessories s, snowmobiles, motorcycle accessories	
	✓ No ☐ Yes					
5.				•	from Part 2, including any here→	\$0.00
P	art 3:	Describe Y	our Personal and	Household Items	•	
Do	you own	or have any leg	al or equitable intere	st in any of the follow	ing items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
6.		old goods and fes: Major appliar	furnishings nces, furniture, linens,	china, kitchenware		
	□ No ☑ Yes	. Describe <b>F</b>	IHG			\$7,000.00
7.		es: Televisions a		_	quipment; computers, printers, scanners; s, cameras, media players, games	
	✓ No ☐ Yes	. Describe				
8.		•			books, pictures, or other art objects; , memorabilia, collectibles	
	□ No ☑ Yes	. Describe a	ırt			\$200.00
9.					nt; bicycles, pool tables, golf clubs, skis;	
	□ No ☑ Yes	. Describe s	porting equipment			\$100.00
10.	Firearm Example		, shotguns, ammunitio	n, and related equipme	nt	
	✓ No ☐ Yes	. Describe				
11.	Clothes Example		thes, furs, leather coat	ts, designer wear, shoe	s, accessories	
	□ No ☑ Yes	. Describe c	lothing			\$500.00
12.	<b>Jewelry</b> Example		velry, costume jewelry,	engagement rings, we	dding rings, heirloom jewelry, watches, gems,	
	□ No ☑ Yes	. Describe j	ewelry			\$200.00
13.		<b>m animals</b> es: Dogs, cats, b	oirds, horses			
	✓ No ☐ Yes	. Describe				

## Case 16-41936-pwb Doc 1 Filed 08/19/16 Entered 08/19/16 13:40:39 Desc Main Document Page 11 of 53

Deb	tor 1	Angel First Name	Romeo Middle Name	Salmon Last Name	Case number (if known)	
14.	Any o				cluding any health aids you	
	did no					
	☐ Ye	es. Give specific formation				
15.					entries for pages you have	\$8,000.00
Pa	art 4:	Describe Y	our Financial Ass	sets		
Doy	ou ow	n or have any leg	gal or equitable intere	st in any of the following	<b>j</b> ?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16.		petition	nave in your wallet, in y	our home, in a safe depos	sit box, and on hand when you file your	
	✓ Ye				Cash:	\$100.00
17.	•	_	ouses, and other simila		f deposit; shares in credit unions, multiple accounts with the same	
	□ No ☑ Ye	o 9s	Institutio	on name:		
	1	7.1. Checking a	account: Checki	ing account		\$300.00
18.			or publicly traded sto investment accounts v	<b>cks</b> with brokerage firms, mone	ey market accounts	
	✓ No		Institution or issue	r name:		
19.	-	-	ock and interests in in partnership, and joint	•	porated businesses, including	
	inf	es. Give specific formation about				
20		em	,	negotiable and non-neg	% of ownership:	
20.	Negoti	iable instruments i	include personal check	s, cashiers' checks, prom	issory notes, and money orders. y signing or delivering them.	
	inf	o es. Give specific formation about em	Issuer name:			
21.	Examp	profit-sharing	RA, ERISA, Keogh, 40	11(k), 403(b), thrift savings	accounts, or other pension or	
		es. List each	Type of account:	Institution name:		

# Case 16-41936-pwb Doc 1 Filed 08/19/16 Entered 08/19/16 13:40:39 Desc Main Document Page 12 of 53

Deb	tor 1 Angel	Romeo	Salmon	Case number (if known)							
	First Name	Middle Name	Last Name								
22.		sed deposits you have ments with landlords, prepai	• •	nue service or use from a company tric, gas, water), telecommunications							
	<b>☑</b> No										
	Yes		Institution name or individ								
23.		ct for a specific periodic p	payment of money to you,	either for life or for a number of years)							
	✓ No ☐ Yes	Issuer name and	description:								
24.	Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).										
	✓ No ✓ Yes	Institution name a	and description. Separatel	v file the records of any interests. 11 U.S.C.	. § 521(c)						
25.	Trusts, equitable or	Yes Institution name and description. Separately file the records of any interests. 11 U.S.C. § 521(c)  Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or									
	powers exercisable	for your benefit									
	✓ No ☐ Yes. Give speci information about										
26.			rets, and other intellectual proceeds from royalties ar								
	<b>☑</b> No										
	Yes. Give speci information about										
27.		es, and other general interpermits, exclusive license	-	n holdings, liquor licenses, professional licen	ises						
	√ No	•	•								
	Yes. Give speci										
	information abou										
Mor	ney or property owed	i to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.						
28.	Tax refunds owed t	o you									
	<b>☑</b> No										
	Yes. Give speci			Federa	l: <b>\$0.00</b>						
	about them, incluyou already filed	•		State:	\$0.00						
	and the tax years			Local:	\$0.00						
29.	Family support Examples: Past due	or lump sum alimony, sp	ousal support, child suppo	rt, maintenance, divorce settlement, propert	y settlement						
	<b>☑</b> No										
	Yes. Give speci	fic information		Alimony:	\$0.00						
				Maintenance:	\$0.00						
				Support:	\$0.00						
				Divorce settlement							
				Property settlemen	t: <b>\$0.00</b>						
30.	Other amounts som	•	a navmente, disability bass	ofite eigh nay vacation now workers!							
		•	e payments, disability bene nefits; unpaid loans you ma	ofits, sick pay, vacation pay, workers' ade to someone else							
	☑ No	fin in formantin									
	☐ Yes. Give speci	ne information									

# Case 16-41936-pwb Doc 1 Filed 08/19/16 Entered 08/19/16 13:40:39 Desc Main Document Page 13 of 53

Debt	or 1 Angel	Romeo	Salmon	Case number (if known)	
	First Name	Middle Name	Last Name		
31.	Interests in insurance Examples: Health, dis	•	health savings accoun	t (HSA); credit, homeowner's, or renter's in	nsurance
	<ul><li>✓ No</li><li>Yes. Name the in company of each and list its value</li></ul>	policy	me:	Beneficiary:	Surrender or refund value:
32.	If you are the benefici	erty that is due you fror ary of a living trust, expe perty because someone	ect proceeds from a life	ied insurance policy, or are currently	
	✓ No ☐ Yes. Give specifi	c information			
33.	-	parties, whether or not, employment disputes, i	•	uit or made a demand for payment nts to sue	
	✓ No ☐ Yes. Describe ea	ch claim			
34.	Other contingent and rights to set off clain	-	f every nature, includi	ng counterclaims of the debtor and	
	✓ No ☐ Yes. Describe ea	ch claim			
35.	Any financial assets	you did not already lis	t		
	<ul><li>✓ No</li><li>✓ Yes. Give specifi</li></ul>	c information			
36.				ny entries for pages you have	\$400.00
Da	rt 5: Describe A	ny Rusinoss-Polat	nd Proporty You C	own or Have an Interest In. List	any roal ostato in Part 1
					any real estate in rait i
37.	— Na Oaka Baata	any legal or equitable i	interest in any busines	ss-related property?	
	No. Go to Part 6.  Yes. Go to line 38				
					Current value of the portion you own? Do not deduct secured claims or exemptions.
38.	Accounts receivable	or commissions you a	Iready earned		
	✓ No ☐ Yes. Describe				
39.	Examples: Business-	rnishings, and supplies related computers, softwairs, electronic devices		copiers, fax machines, rugs, telephones,	
	✓ No ☐ Yes. Describe				
40.	Machinery, fixtures,	equipment, supplies yo			
	<b>☑</b> No		ou use in business, an	d tools of your trade	
	Yes. Describe		ou use in business, an	d tools of your trade	
41.	Yes. Describe		ou use in business, an	d tools of your trade	

# Case 16-41936-pwb Doc 1 Filed 08/19/16 Entered 08/19/16 13:40:39 Desc Main Document Page 14 of 53

Deb	tor 1	Angel	Romeo	Salmon	Case number (if known)	
	F	First Name	Middle Name	Last Name	· · · · · ·	
42.	Interests	s in partnership	s or joint ventures			
	✓ No	Describe N	Jame of entity		% of ownership:	
43	_		lists, or other compi	ilations	70 of Ownership.	
45.		zi iists, iiiaiiiig	nata, or other compr	lations		
	▼ No Yes.	Do your lists in No		entifiable information (a	as defined in 11 U.S.C. § 101(41A))?	
44.	Any bus	iness-related p	roperty you did not a	ılready list		
	✓ No ☐ Yes.	Give specific in	nformation.			
45.					entries for pages you have	\$0.00
Pa					ated Property You Own or Have a	ın Interest In.
	IT	you own or r	nave an interest in	farmland, list it in Par	T1.	
46.	Do you o	own or have an	y legal or equitable i	nterest in any farm- or c	commercial fishing-related property?	
	لخا	Go to Part 7. Go to line 47.				
						Current value of the portion you own? Do not deduct secured claims or exemptions.
47.	Farm an		oultry, farm-raised fish			
	✓ No ☐ Yes.					
48.	Cropse	either growing	or harvested			
		Give specific				
49.	Farm an	d fishing equip	ment, implements, m	nachinery, fixtures, and	tools of trade	
	✓ No ☐ Yes.					
50.	Farm an	d fishing suppl	lies, chemicals, and f	eed		
	✓ No ☐ Yes.					
51.	Any farn	n- and commer	cial fishing-related p	roperty you did not alre	ady list	
		Give specific				
52.				om Part 6, including any	entries for pages you have	\$0.00

### Case 16-41936-pwb Doc 1 Filed 08/19/16 Entered 08/19/16 13:40:39 Desc Main Document Page 15 of 53

Salmon Debtor 1 Angel Romeo Case number (if known) Middle Name First Name Last Name Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information. \$0.00 54. Add the dollar value of all of your entries from Part 7. Write that number here..... List the Totals of Each Part of this Form Part 8: 55. Part 1: Total real estate, line 2..... \$90,000.00 56. Part 2: Total vehicles, line 5 \$0.00 \$8,000.00 57. Part 3: Total personal and household items, line 15 58. Part 4: Total financial assets, line 36 \$400.00 59. Part 5: Total business-related property, line 45 \$0.00 60. Part 6: Total farm- and fishing-related property, line 52 \$0.00 61. Part 7: Total other property not listed, line 54 \$0.00 Copy personal \$8,400.00 62. Total personal property. Add lines 56 through 61..... \$8,400.00 property total \$98,400.00 63. Total of all property on Schedule A/B. Add line 55 + line 62.....

## Case 16-41936-pwb Doc 1 Filed 08/19/16 Entered 08/19/16 13:40:39 Desc Main Document Page 16 of 53

Fill in this inf	ormation to i	dentify your	case:				
Debtor 1	Angel	Romeo	Salmon				
	First Name	Middle Name					
Debtor 2 (Spouse, if filing)	First Name	Middle Name	e Last Name				
1		r the: <b>NORTHE</b>	RN DISTRICT OF	GEO	RGIA	Chook if this is on	
Case number (if known)						Check if this is an amended filing	
Official Form	106C						
Schedule C:	The Prop	erty You Cl	aim as Exemp	ot			04/16
Using the property space is needed, fi write your name an For each item of p is to state a speciexempted up to the	you listed on Sc ill out and attach id case number ( property you cla fic dollar amour ne amount of an	hedule A/B: Prop to this page as m if known). im as exempt, you as exempt. Al y applicable stat	nerty (Official Form 106 nany copies of Part 2 ou must specify the a ternatively, you may tutory limit. Some ex	6A/B 2: Ad amou clair cemp	as your source, list the ditional Page as necount of the exemption the full fair market tionssuch as those	responsible for supplying correct informe property that you claim as exempt. essary. On the top of any additional payou claim. One way of doing so value of the property being for health aids, rights to	If more
exemption of 100%	% of fair market	value under a la	w that limits the exe	mpti	on to a particular do	However, if you claim an Ilar amount and the value of the ole statutory amount.	
Part 1: Ide	entify the Pro	perty You Cla	aim as Exempt				
1. Which set of	exemptions are	you claiming?	Check one only,	even	if your spouse is filing	g with you.	
	•		kruptcy exemptions.		, ,	,	
_	claiming federal	exemptions. 11 L	J.S.C. § 522(b)(2)				
2. For any prop	erty you list on	S <i>chedule A/B</i> th	at you claim as exen	npt, i	ill in the information	below.	
Brief description of Schedule A/B that					ount of the mption you claim	Specific laws that allow exemption	on
			Copy the value from Schedule A/B		eck only one box for h exemption		
Brief description:			\$90,000.00	$\overline{\mathbf{A}}$	\$0.00	O.C.G.A. § 44-13-100(a)(1)	
Condominium					100% of fair market		
Line from Schedule	e A/B: <b>1.1</b>				value, up to any applicable statutory limit		
Brief description:			\$7,000.00	$\overline{\mathbf{V}}$	\$5,000.00	O.C.G.A. § 44-13-100(a)(4)	
HHG					100% of fair market		
(1st exemption of Line from Schedule		s asset)			value, up to any applicable statutory limit		
(Subject to ad	-	/19 and every 3 y	more than \$160,375? years after that for cas	es fi	ed on or after the date		

#### Case 16-41936-pwb Doc 1 Filed 08/19/16 Entered 08/19/16 13:40:39 Desc Main Document Page 17 of 53

Debtor 1 Angel Romeo Salmon Case number (if known) First Name Middle Name Last Name Part 2: **Additional Page** Brief description of the property and line on **Current value of** Specific laws that allow exemption Amount of the Schedule A/B that lists this property exemption you claim the portion you own Copy the value from Check only one box for Schedule A/B each exemption Brief description: \$7,000.00 \$2,000.00 O.C.G.A. § 44-13-100(a)(6)  $\overline{\mathbf{Q}}$ **HHG** 100% of fair market (2nd exemption claimed for this asset) value, up to any applicable statutory Line from Schedule A/B: 6 limit Brief description: \$200.00 O.C.G.A. § 44-13-100(a)(4) \$0.00  $\checkmark$ art 100% of fair market (1st exemption claimed for this asset) value, up to any Line from Schedule A/B: 8 applicable statutory limit Brief description: \$200.00 \$200.00 O.C.G.A. § 44-13-100(a)(6)  $\sqrt{\phantom{a}}$ art 100% of fair market (2nd exemption claimed for this asset) value, up to any applicable statutory Line from Schedule A/B: 8 limit Brief description: \$100.00 \$0.00 O.C.G.A. § 44-13-100(a)(4)  $\overline{\mathbf{Q}}$ sporting equipment 100% of fair market (1st exemption claimed for this asset) value, up to any applicable statutory Line from Schedule A/B: limit Brief description: \$100.00 \$100.00 O.C.G.A. § 44-13-100(a)(6)  $\overline{\mathbf{A}}$ sporting equipment 100% of fair market (2nd exemption claimed for this asset) value, up to any applicable statutory Line from Schedule A/B: limit Brief description: \$500.00 O.C.G.A. § 44-13-100(a)(4)  $\overline{\mathbf{V}}$ \$0.00 clothing 100% of fair market (1st exemption claimed for this asset) value, up to any applicable statutory Line from Schedule A/B: 11 limit Brief description: \$500.00 \$500.00 O.C.G.A. § 44-13-100(a)(1)  $oldsymbol{
abla}$ clothing 100% of fair market (2nd exemption claimed for this asset) value, up to any Line from Schedule A/B: 11 applicable statutory limit Brief description: \$200.00 \$200.00 O.C.G.A. § 44-13-100(a)(5) ablajewelry 100% of fair market value, up to any Line from Schedule A/B: 12 applicable statutory limit Brief description: \$100.00 O.C.G.A. § 44-13-100(a)(6) \$100.00  $\checkmark$ cash 100% of fair market value, up to any Line from Schedule A/B: 16 applicable statutory

## Case 16-41936-pwb Doc 1 Filed 08/19/16 Entered 08/19/16 13:40:39 Desc Main Document Page 18 of 53

Debtor 1	Angel First Name	Romeo Middle Name	Salmon Last Name	Case numbe	er (if known)
Part 2:	Additional	Page			
Brief description of the property and line on Schedule A/B that lists this property			Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
			Copy the value from Schedule A/B	Check only one box for each exemption	
	Brief description:  Checking account  Line from Schedule A/B:		\$300.00	<b>\$300.00</b>	O.C.G.A. § 44-13-100(a)(6)
Line from S				value, up to any applicable statutory limit	

## Case 16-41936-pwb Doc 1 Filed 08/19/16 Entered 08/19/16 13:40:39 Desc Main Document Page 19 of 53

Debtor 1	Angel	Romeo	Salmon					
י הפטוטו ו	First Name	Middle Name	Last Name					
Debtor 2								
(Spouse, if filing)	First Name	Middle Name	Last Name					
United States Bar	nkruptcy Court for	the: NORTHERN DIS	STRICT OF GEOR	RGIA				
	. ,							
Case number (if known)					Check if this is amended filing			
Official Form	106D							
Schedule D:	: Creditors	Who Have Clair	ms Secured	by Property		12/15		
correct informatio	on. If more space		Additional Page, fill	ogether, both are equal it out, number the entri own).				
	. •	•	•					
-								
ш	in all of the inform		ourt with your other s	chedules. You have noth	ning else to report on th	is form.		
Part 1: Lis	t All Secured	Claims						
2. List all secure	r <b>ed claims</b> If a cr	editor has more than or	ne secured					
		for each claim. If mor		Column A	Column B	Column C		
	•	st the other creditors in		Amount of claim	Value of collateral	Unsecured		
much as poss creditor's nam		s in alphabetical order a	according to the	Do not deduct the value of collateral	that supports this claim	portion If any		
2.1		Describe the p		\$108,840.00	\$90,000.00	\$18,840.00		
	Servicing, Inc	— Condoninium	n					
Creditor's name PO Box 65250 Number Street								
Creditor's name PO Box 65250		As of the date	you file, the claim	is: Check all that apply.				
Creditor's name PO Box 65250		As of the date	•	is: Check all that apply.				
Creditor's name PO Box 65250 Number Street  Salt Lake City	UT 84165	Contingent	t	is: Check all that apply.				
Creditor's name PO Box 65250 Number Street  Salt Lake City City	State ZIP Code	Contingent	t	is: Check all that apply.				
Creditor's name PO Box 65250  Number Street  Salt Lake City City  Who owes the dek	State ZIP Code	Contingent Unliquidate Disputed Nature of lien.	t ed Check all that app	ly.				
Creditor's name PO Box 65250 Number Street  Salt Lake City City  Who owes the det Debtor 1 only	State ZIP Code	Contingent Unliquidate Disputed Nature of lien. An agreem	t ed . Check all that app nent you made (such	ly. as mortgage or secured	car loan)			
Creditor's name PO Box 65250  Number Street  Salt Lake City City  Who owes the det Debtor 1 only Debtor 2 only	State ZIP Code bt? Check one.	Contingent Unliquidate Disputed Nature of lien. An agreem Statutory li	t ed Check all that app nent you made (such en (such as tax lien,	ly. as mortgage or secured	car loan)			
Creditor's name PO Box 65250  Number Street  Salt Lake City City  Who owes the dek Debtor 1 only Debtor 2 only Debtor 1 and D	State ZIP Code bt? Check one.	Contingent Unliquidate Disputed Nature of lien. An agreem Statutory li	t ed Check all that app nent you made (such en (such as tax lien, lien from a lawsuit	ly. as mortgage or secured mechanic's lien)	car loan)			
Creditor's name PO Box 65250 Number Street  Salt Lake City City Who owes the det Debtor 1 only Debtor 2 only Debtor 1 and D At least one of Check if this c	State ZIP Code  bt? Check one.  Debtor 2 only the debtors and a  claim relates	Contingent Unliquidate Disputed Nature of lien. An agreem Statutory li Judgment	t ed Check all that app nent you made (such en (such as tax lien, lien from a lawsuit uding a right to offse	ly. as mortgage or secured mechanic's lien)	car loan)			
Creditor's name PO Box 65250 Number Street  Salt Lake City City Who owes the det Debtor 1 only Debtor 2 only Debtor 1 and D At least one of	State ZIP Code  bt? Check one.  Debtor 2 only the debtors and a  claim relates ty debt	Contingent Unliquidate Disputed Nature of lien. An agreem Statutory li Judgment Vother (incle	t ed Check all that app nent you made (such en (such as tax lien, lien from a lawsuit uding a right to offse	ly. as mortgage or secured mechanic's lien)	car loan)			

Add the dollar value of your entries in Column A on this page. Write that number here:

\$108,840.00

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

\$108,840.00

# Case 16-41936-pwb Doc 1 Filed 08/19/16 Entered 08/19/16 13:40:39 Desc Main Document Page 20 of 53

		dentify your c								
Debtor 1	Angel First Name	Romeo Middle Name	Salmon Last Name							
Debtor 2										
(Spouse, if filing)	First Name	Middle Name	Last Name							
United States Bar	nkruptcy Court fo	or the: NORTHER	RN DISTRICT OF G	EORGIA						
Case number (if known)									Check if this is a amended filing	an
Official Form	106E/F									
Schedule E/	F: Credito	rs Who Hav	e Unsecured	Claims						12/15
Do not include any If more space is not to this page. On the space is not to this page.	y creditors with eeded, copy the he top of any ac	partially secured Part you need, f	and on Schedule G: I claims that are liste ill it out, number the rrite your name and secured Claims	ed in <i>Schedule</i> entries in the b	D: C	redito s on t	ors W	ho H	old Claims Secur	ed by Property.
1. Do any credit	ors have priorit	y unsecured clai	ms against you?							
□ No. Got	o Part 2.									
claim. For ear show both price more space is	ch claim listed, id ority and nonprio	dentify what type o rity amounts. As n rity unsecured clai	creditor has more that f claim it is. If a claim nuch as possible, list ms, fill out the Contin	n has both priorit the claims in alp	y and	d nonp etical	priorit order	y amo acco	ounts, list that clai	m here and or's name. If
(For an explar	nation of each typ	pe of claim, see th	e instructions for this	form in the instr			klet. <b>clain</b>	n	Priority	Nonpriority
									amount	amount
Coordia Danastr	mant of Davis				_	\$1	,344	.58	\$1,344.58	\$0.00
Georgia Departr Priority Creditor's Nam Bankruptcy Unit	е	ue	Last 4 digits of acc		_1_	2	8_	2		
Number Street 1800 Century BI		200	When was the deb	i incurreur						
1000 Century Bi	va, NE, Ole 17	200	<ul> <li>As of the date you</li> <li>Contingent</li> </ul>	file, the claim i	s: Cl	neck a	all tha	at app	ly.	
Atlanta	GA	30345	Unliquidated							
City	State	ZIP Code	- Disputed							
<b>–</b>	Debtor 2 only the debtors and claim is for a co	another	Type of PRIORITY unsecured claim:  □ Domestic support obligations □ Taxes and certain other debts you owe the government □ Claims for death or personal injury while you were intoxicated □ Other. Specify							
✓ No Yes										

### Case 16-41936-pwb Doc 1 Filed 08/19/16 Entered 08/19/16 13:40:39 Desc Main Document Page 21 of 53

Salmon Debtor 1 Angel Romeo Case number (if known) First Name Middle Name Last Name Part 1: Your PRIORITY Unsecured Claims -- Continuation Page After listing any entries on this page, number them sequentially from the **Total claim Priority Nonpriority** previous page. amount amount 2.2 \$1,077.89 \$1,077.89 \$0.00 **Gordon County Board of Assessors** - Last 4 digits of account number <u>7 7 1 9</u> Priority Creditor's Name PO Box 533 When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Calhoun GA 30703-0533 Disputed City State ZIP Code Who incurred the debt? Check one. Type of PRIORITY unsecured claim: Debtor 1 only  $\overline{\mathbf{A}}$ Domestic support obligations Debtor 2 only Taxes and certain other debts you owe the government Debtor 1 and Debtor 2 only Claims for death or personal injury while you were At least one of the debtors and another intoxicated Check if this claim is for a community debt Other. Specify Is the claim subject to offset? ✓ No Yes Yes

## Case 16-41936-pwb Doc 1 Filed 08/19/16 Entered 08/19/16 13:40:39 Desc Main Document Page 22 of 53

Debtor 1	Angel First Name	Romeo Middle Name	Salmon Last Name	Case number (if known)
Part 2:	List All of	Your NONPRIORI	TY Unsecured Clain	ns
			ed claims against you?	
	•			court with you other schedules.
List al	II of your nonpri editor has more the f claim it is. Do r	nan one nonpriority uns not list claims already in	ecured claim, list the cred cluded in Part 1. If more	er of the creditor who holds each claim.  litor separately for each claim. For each claim listed, identify what than one creditor holds a particular claim, list the other creditors in the Continuation Page of Part 2.
		,		Total claim
onpriority Cr	lin Financial reditor's Name Bryant Pkwy St	e D	Last 4 digits of acco When was the debt i	<del> </del>
	Street		As of the date you fi  Contingent Unliquidated Disputed	le, the claim is: Check all that apply.
Debtor Debtor Debtor At least Check	1 only 2 only 1 and Debtor 2 of t one of the debto	ors and another or a community debt	Student loans Obligations arisin that you did not re	TY unsecured claim: g out of a separation agreement or divorce eport as priority claims or profit-sharing plans, and other similar debts
4.2 Afni onpriority Ci 310 Mart	reditor's Name t <b>in Luther King</b> Street	j Dr		<del>_</del> <del>_</del> <del>_</del> <del>_</del> <del>_</del> _ =
Debtor Debtor Debtor At least Check	red the debt? 1 only 2 only 1 and Debtor 2 of	ors and another or a community debt	☐ Disputed ☐ Type of NONPRIORI ☐ Student loans ☐ Obligations arisin that you did not re	TY unsecured claim: g out of a separation agreement or divorce eport as priority claims or profit-sharing plans, and other similar debts

### Case 16-41936-pwb Doc 1 Filed 08/19/16 Entered 08/19/16 13:40:39 Desc Main Document Page 23 of 53

Debtor 1 Angel Romeo Salmon Case number (if known) First Name Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page After listing any entries on this page, number them sequentially from the **Total claim** previous page. 4.3 \$2,277.00 **Capital One** Last 4 digits of account number <u>0 9 0 1</u> Nonpriority Creditor's Name When was the debt incurred? 02/2007 PO Box 30285 Number As of the date you file, the claim is: Check all that apply. ☐ Contingent Unliquidated Disputed Salt Lake City UT 84130 ZIP Code City State Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify ☐ Check if this claim is for a community debt **Credit Card** Is the claim subject to offset? **☑** No Yes П \$255.00 Convergent Outsoucing, Inc Last 4 digits of account number 5 1 1 9 Nonpriority Creditor's Name When was the debt incurred? 10/2014 PO Box 9004 As of the date you file, the claim is: Check all that apply. Number Contingent Unliquidated Disputed  $\square$ Renton WA 98057 City State ZIP Code Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only П that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify ☐ Check if this claim is for a community debt Account Is the claim subject to offset? **☑** No ☐ Yes 4.5 \$0.00 Last 4 digits of account number Kohls/Capital One 9 7 1 1 Nonpriority Creditor's Name When was the debt incurred? 12/2015 PO Box 3120 As of the date you file, the claim is: Check all that apply. Number Contingent Unliquidated Disputed Milwaukee WI 53201 City ZIP Code State Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify Check if this claim is for a community debt Account Is the claim subject to offset? No Yes

### Case 16-41936-pwb Doc 1 Filed 08/19/16 Entered 08/19/16 13:40:39 Desc Main Document Page 24 of 53

Salmon Debtor 1 Angel Romeo Case number (if known) First Name Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page After listing any entries on this page, number them sequentially from the **Total claim** previous page. 4.6 \$3,805.00 Select Portfolio Servicing, Inc. Last 4 digits of account number 1 9 3 2 Nonpriority Creditor's Name When was the debt incurred? **Attn: General Correspondence** Number Street As of the date you file, the claim is: Check all that apply. PO Box 65250 Contingent Unliquidated ☐ Disputed Salt Lake City UT 84165-0250 City State ZIP Code Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify ☐ Check if this claim is for a community debt Account Is the claim subject to offset? **☑** No

T Yes

# Case 16-41936-pwb Doc 1 Filed 08/19/16 Entered 08/19/16 13:40:39 Desc Main Document Page 25 of 53

Debtor 1	Angel First Name		liddle Name	Salmon Last Name	Case	number (	if known)	
Part 3:				out a Debt That You Alread	dy Lis	ted		
5. Use the For except the credit debts	his page only if y xample, if a colle tor in Parts 1 or i	you have ection ac 2, then li in Parts	e others to be no gency is trying to ist the collection 1 or 2, list the ac	etified about your bankruptcy, fo o collect from you for a debt you agency here. Similarly, if you l lditional creditors here. If you d	r a deb i owe to	t that yo someo	ne else, list the original one creditor for any of	the
Chase Mt	tg			On which entry in Part 1 or	Part 2	did you	list the original creditor	?
Name P.o. Box 2 Number	<b>24696</b> Street			Line of (Check one, FHA Real Estate — Mortgage			reditors with Priority Unscreditors with Nonpriority	
Columbu City	s	OH State	<b>43224</b> ZIP Code	— Last 4 digits of account nui	mber	7 3	_ 8 3	
Cit Fin Se Name Attn: Ban Number 1000 Tec	_			On which entry in Part 1 or Lineof (Check one, Account	): 🔲	Part 1: C	list the original creditor reditors with Priority Unsa reditors with Nonpriority	ecured Claims
<b>O'Fallon</b> City		MO State	<b>63368</b> ZIP Code	— Last 4 digits of account nu	mber	9 6	0 _1	
Market St	t Mg			On which entry in Part 1 or	Part 2	did you	list the original creditor	?
Name 2650 Mcc Number	Street	20		Line of (Check one, FHA Real Estate Mortgage	_		reditors with Priority Unsi reditors with Nonpriority	
Clearwate City	er	FL State	<b>33759</b> ZIP Code	Last 4 digits of account nu	mber	0 4		
	Financial/Citif	inancia	I	On which entry in Part 1 or	Part 2	did you	list the original creditor	?
Name 6801 Colv Number NTSB-232	well Blvd Street 20			Lineof (Check one, Account			reditors with Priority Unsereditors with Nonpriority	
rving City		TX State	<b>75039</b> ZIP Code	— Last 4 digits of account nu	mber	5 4	9 4	
Onemain	Financial/Citif	inancia	l	On which entry in Part 1 or	Part 2	did you	list the original creditor	?
Name	well Blvd Street			Line of (Check one,	_		reditors with Priority Uns	
				Last 4 digits of account numbers	mber	6 0	5 8	

Irving

City

75039

ZIP Code

 $\mathsf{TX}$ 

State

# Case 16-41936-pwb Doc 1 Filed 08/19/16 Entered 08/19/16 13:40:39 Desc Main Document Page 26 of 53

Debtor 1	Angel	F	Romeo	Salmon	Case number (if known)		
	First Name	M	liddle Name	Last Name			
Part 3:	List Other	rs to Be	e Notified Ab	out a Debt That You Already Listed Continuation Page			
Santande	er Consumer U	ISA		On which entry in Pa	rt 1 or Part 2 did you list the original creditor?		
Name PO Box 9	961245			Line of (Che	ck one): Part 1: Creditors with Priority Unsecured Claims		
Number	Street			Deficiency	Part 2: Creditors with Nonpriority Unsecured Claims		
				—— Last 4 digits of acco	unt number 1 0 0 0		
Fort Worth TX 76161			76161		<u> </u>		
City		State	ZIP Code				

### Case 16-41936-pwb Doc 1 Filed 08/19/16 Entered 08/19/16 13:40:39 Desc Main Document Page 27 of 53

Debtor 1	Angel	Romeo	Salmon	Case number (if known)	
	First Name	Middle Name	Last Name	· · · · · · · · · · · · · · · · · · ·	

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

				Total claim
Total claims from Part 1	6a.	Domestic support obligations	6a.	\$0.00
nom rait i	6b.	Taxes and certain other debts you owe the government	6b.	\$2,422.47
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d. <b>-</b>	\$0.00
	6e.	<b>Total.</b> Add lines 6a through 6d.	6d.	\$2,422.47
				Total claim
Total claims from Part 2	6f.	Student loans	6f.	\$0.00
	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i. <b>⊣</b>	\$12,371.58
	6j.	<b>Total.</b> Add lines 6f through 6i.	6j.	\$12,371.58

### Case 16-41936-pwb Doc 1 Filed 08/19/16 Entered 08/19/16 13:40:39 Desc Main Document Page 28 of 53

Fill in this inf	ormation to iden			
Debtor 1	Angel First Name	Romeo Middle Name	Salmon Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
United States Ba	nkruptcy Court for the	: NORTHERN DIST	RICT OF GEORGIA	
Case number (if known)				Check if this is an amended filing

#### Official Form 106G

#### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

1. Do you have any executory contracts or unexpired leases?

- No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.

  Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Property* (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

## Case 16-41936-pwb Doc 1 Filed 08/19/16 Entered 08/19/16 13:40:39 Desc Main Document Page 29 of 53

Fill in this inf	ormation to i	dentify your case		
		, ,	•	
Debtor 1	Angel	Romeo	Salmon	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Po	akruptov Court fo	r that NODTHEDN D	NSTRICT OF GEORGIA	
Officed States Dai	Tikrupicy Court ic	i tile. <u>NORTHERN D</u>	DISTRICT OF GEORGIA	
Case number				☐ Check if this is an
(if known)				amended filing
				-
Official Form	106H			
		_		
Schedule H:	: Your Cod	ebtors		
	Additional Page	, fill it out, and number		rrect information. If more space is the left. Attach the Additional Page to this wn). Answer every question.
page. On the top	Additional Page	e, fill it out, and number al Pages, write your n	er the entries in the boxes on t	the left. Attach the Additional Page to this wn). Answer every question.
Do you have No Yes Within the las	Additional Page of any Additional any codebtors?	e, fill it out, and number al Pages, write your n (If you are filing a jo you lived in a commu	er the entries in the boxes on to ame and case number (if known int case, do not list either spous nity property state or territory	the left. Attach the Additional Page to this wn). Answer every question.
Do you have No Yes  Within the las	Additional Page of any Additional any codebtors?  st 8 years, have na, California, Ida	e, fill it out, and number al Pages, write your n (If you are filing a jo you lived in a commu	er the entries in the boxes on to ame and case number (if known int case, do not list either spous nity property state or territory	the left. Attach the Additional Page to this wn). Answer every question.  se as a codebtor.)  ? (Community property states and territories
nage. On the top  1. Do you have	Additional Page of any Additional any codebtors?  st 8 years, have na, California, Ida to line 3.	e, fill it out, and number al Pages, write your n (If you are filing a jo you lived in a commu ho, Louisiana, Nevada	er the entries in the boxes on to ame and case number (if known int case, do not list either spous nity property state or territory	the left. Attach the Additional Page to this wn). Answer every question.  The as a codebtor.)  The as a codebtor.)  The as a codebtor of the code of t

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

## Case 16-41936-pwb Doc 1 Filed 08/19/16 Entered 08/19/16 13:40:39 Desc Main Document Page 30 of 53

Fill in this info	rmation to	identify your case:				
Debtor 1	Angel	Romeo	Salmon			
	First Name	Middle Name	Last Name		Che	eck if this is:
Debtor 2	First Name	Middle Nows	Last Name		-   🗖	An amended filing
(Spouse, if filing)		Middle Name				A supplement showing postpetition
United States Bar Case number	nkruptcy Court	for the: NUKIHERN	DISTRICT OF C	DEURGIA	-  "	chapter 13 income as of the following date:
(if known)						MM / DD / YYYY
Official Form	1061					
Schedule I: Y	our Inco	me				12/15
responsible for sup include information about your spouse. your name and case	plying correct about your s If more spac	t information. If you are pouse. If you are separ e is needed, attach a se nown). Answer every o	e married and not rated and your sp eparate sheet to t	t filing jointly, an ouse is not filing	d your g with y	d Debtor 2), both are equally spouse is living with you, rou, do not include information any additional pages, write
Fill in your empinformation.	oloyment		Debtor 1			Debtor 2 or non-filing spouse
If you have more		Empleyment status	_			
job, attach a sep with information		Employment status	<ul><li>✓ Employed</li><li>✓ Not employ</li></ul>	yed		<ul><li>☐ Employed</li><li>☐ Not employed</li></ul>
additional emplo	oyers.	Occupation	Machine Ope	rator		
Include part-time or self-employed		Employer's name				
Occupation may student or home applies.		Employer's address	Number Street			Number Street
						_
			City	State Zip	Code	City State Zip Code
		How long employed t	here?	·		•
		•				
		out Monthly Incom				
Estimate monthly in non-filing spouse unl			<b>n.</b> If you have not	hing to report for	any line	e, write \$0 in the space. Include your
		e more than one employ arate sheet to this form.	er, combine the in	formation for all e	mploye	rs for that person on the lines below. If
				For Debte	or 1	For Debtor 2 or non-filing spouse
		alary, and commission d monthly, calculate what			17.00	<u> </u>
3. Estimate and li	st monthly ov	ertime pay.		3. +	\$0.00	
4. Calculate gross	s income. Ad	ld line 2 + line 3.		4. <b>\$3,0</b>	17.00	

Official Form 106l Schedule I: Your Income page 1

## Case 16-41936-pwb Doc 1 Filed 08/19/16 Entered 08/19/16 13:40:39 Desc Main Document Page 31 of 53

Debt	or 1	Angel		Salmon			Case nu	ımbe	er (if knov	vn)		
		First Name	Middle Name L	ast Name		For	Debtor 1		For Debte		<u>)                                    </u>	
	Сор	y line 4 here		····· →	4.		\$3,017.00					
5.	List	all payroll dec	ductions:									
	5a.	Tax, Medicar	e, and Social Security deductions		5a.	_	\$413.00					
	5b.	Mandatory co	ontributions for retirement plans		5b.		\$0.00					
	5c.	Voluntary cor	ntributions for retirement plans		5c.		\$0.00					
	5d.	Required repa	ayments of retirement fund loans		5d.	_	\$0.00					
	5e.	Insurance			5e.	_	\$0.00					
	5f.	Domestic sup	pport obligations		5f.	_	\$0.00					
	5g.	Union dues			5g.	_	\$0.00					
	5h.	Other deduct Specify:	ions.		5h.	+ _	\$0.00					
6.		I the payroll de - 5h.	eductions. Add lines 5a + 5b + 5c -	+ 5d + 5e + 5f +	6.	_	\$413.00					
7. 0			• • •	ne 6 from line 4.	7.	_	\$2,604.00					
			me regularly received:	ting o	90		¢0.00					
	oa.	business, pro	rom rental property and from operatoression, or farm	•	8a.	_	\$0.00					
		gross receipts	ment for each property and business s, ordinary and necessary business ex hly net income.	•								
	8b.	Interest and o	dividends		8b.		\$0.00					
	8c.		ort payments that you, a non-filing s gularly receive	spouse, or a	8c.	_	\$0.00					
			ny, spousal support, child support, ma ment, and property settlement.	aintenance,								
	8d.	Unemployme	ent compensation		8d.		\$0.00					
		Social Securi			8e.	_	\$0.00					
	8f.	Other govern	ment assistance that you regularly	receive		_						
		cash assistan	assistance and the value (if known) or ce that you receive, such as food star or the Supplemental Nutrition Assistan bsidies.	mps								
		Specify:			8f.		\$0.00					
	8g.	Pension or re	etirement income		8g.		\$0.00					
	8h.	Other monthl	y income.			_						
		Specify:			8h.,	+ _	\$0.00					
9.	Add	l all other inco	me. Add lines 8a + 8b + 8c + 8d + 8e	e + 8f + 8g + 8h.	9.		\$0.00	]				
10.	Calc Add	culate monthly	r income. Add line 7 + line 9. ine 10 for Debtor 1 and Debtor 2 or no	on-filing spouse	10.		\$2,604.00	]+[			]=[	\$2,604.00
11.	Stat Inclu frier	te all other regude contribution ands or relatives.	ular contributions to the expenses as from an unmarried partner, membe	that you list in Sers of your househ	old, y	our o	dependents, yo					ıle J.
	Spe	cify:								11.	+	\$0.00
		-								-	Г	
			n the last column of line 10 to the ar amount on the Summary of Your Ass							12.		\$2,604.00
		applies.	amount on the Summary or Tour Ass	sets and Liabilities	anu	Certa	aiii Statisticai i	IIIOII	nauon,			Combined nonthly income
13.	Do y ☑	you expect an No.	increase or decrease within the year	ar after you file t	his fo	orm?						
		Yes. Explain:										

# Case 16-41936-pwb Doc 1 Filed 08/19/16 Entered 08/19/16 13:40:39 Desc Main Document Page 32 of 53

F	ill in this inforn	nation to ide	ntify your case:			Cho	ck if this	vie:	
	Debtor 1	Angel	Romeo	Salme	on			ended filing	
		First Name	Middle Name	Last Na		$  \vdash$	A supp	lement showing r 13 expenses a	
	Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Na	me			ng date:	
	United States Bank	ruptcy Court for	the: NORTHERN DI	STRICT O	F GEORGIA		MM / D	D / YYYY	
l	Case number (if known)						iviivi / D	2,	
Of	ficial Form 10	)6J							
Sc	hedule J: Yo	 our Expen	ses						12/15
cor nan	rect information. I	f more space is	sible. If two married p s needed, attach anoth Answer every question usehold	er sheet to t					
1.	Is this a joint cas	e?							
2.	_ No	Debtor 2 live in s. Debtor 2 musendents?	a separate household?  st file Official Form 106J  No  Yes. Fill out this in	-2, Expense	Dependent's relati	onshi		2.  Dependent's age	Does dependent live with you?
	Debtor 2.	Tund	for each dependent	t	Daughter			3	□ No
	Do not state the d names.	ependents'			Dauginei			<u> </u>	- ☑ Yes □ No - □ Yes
									□ No
									- □ Yes □ No
									Yes
									□ No - □ Yes
3.	Do your expense expenses of peo yourself and you	ple other than	✓ No ☐ Yes						
Р	art 2: Estima	ate Your On	going Monthly Exp	enses					
Est to r	imate your expens	es as of your b	ankruptcy filing date u	ınless you a	_			-	
			cash government assis t on Schedule I: Your I					Your expens	ses
4.			expenses for your residence and any rent for the grou					4	\$721.00
	If not included in	line 4:							
	4a. Real estate t	axes						4a	
	4b. Property, hor	neowner's, or re	nter's insurance					4b	
	4c. Home mainte	enance, repair, a	and upkeep expenses					4c	
	4d. Homeowner's	s association or	condominium dues					4d.	

### Case 16-41936-pwb Doc 1 Filed 08/19/16 Entered 08/19/16 13:40:39 Desc Main Document Page 33 of 53

Debtor 1 Angel Romeo Salmon Case number (if known) Middle Name Last Name First Name Your expenses Additional mortgage payments for your residence, such as home equity loans 5. **Utilities:** 6a. Electricity, heat, natural gas 6a. \$250.00 6b. Water, sewer, garbage collection 6b. 6c. Telephone, cell phone, Internet, satellite, and 6c. cable services 6d. 6d. Other. Specify: Cell Phone \$100.00 Food and housekeeping supplies 7. \$400.00 Childcare and children's education costs 8. Clothing, laundry, and dry cleaning 9. \$50.00 10. Personal care products and services 10. \$23.00 11. Medical and dental expenses 11. \$50.00 12. Transportation. Include gas, maintenance, bus or train 12. \$100.00 fare. Do not include car payments. 13. Entertainment, clubs, recreation, newspapers, 13. magazines, and books 14. Charitable contributions and religious donations 14. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15a. 15b. Health insurance 15b. 15c. Vehicle insurance 15c. \$150.00 15d. Other insurance. Specify: 15d. **16.** Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16. 17. Installment or lease payments: 17a. Car payments for Vehicle 1 Car payment on sister's car 17a. \$321.00 17b. Car payments for Vehicle 2 17b. 17c. Other. Specify: \_\_\_ 17c. 17d. Other. Specify: 17d. 18. Your payments of alimony, maintenance, and support that you did not report as 18. deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 19. Other payments you make to support others who do not live with you. Specify: Mother in Jamaica 19. \$150.00

## Case 16-41936-pwb Doc 1 Filed 08/19/16 Entered 08/19/16 13:40:39 Desc Main Document Page 34 of 53

Deb	otor 1	Angel	Romeo	Salmon	Case number (if kno	wn)
		First Name	Middle Name	Last Name		- <del>-</del>
20.		er real property of edule I: Your Inc		lines 4 or 5 of this form or	on	
	20a.	Mortgages on	other property		20a.	
	20b.	Real estate tax	ces		20b.	
	20c.	Property, home	eowner's, or renter's insura	nce	20c.	
	20d.	Maintenance, r	repair, and upkeep expens	es	20d.	
	20e.	Homeowner's a	association or condominiur	n dues	20e.	\$30.00
21.	Othe	er. Specify:			21.	+
22.	Calc	ulate your mont	:hly expenses.			
	22a.	Add lines 4 thre	ough 21.		22a.	\$2,345.00
	22b.	Copy line 22 (r	nonthly expenses for Debt	or 2), if any, from Official For	rm 106J-2. 22b.	
	22c.	Add line 22a a	nd 22b. The result is your	monthly expenses.	22c.	\$2,345.00
23.	Calc	ulate your mont	thly net income.			
	23a.	Copy line 12 (y	our combined monthly inco	ome) from Schedule I.	23a.	\$2,604.00
	23b.	Copy your mor	nthly expenses from line 22	?c above.	23b.	\$2,345.00
	23c.		monthly expenses from you our monthly net income.	ır monthly income.	23c.	\$259.00
24.	Do y	ou expect an in	crease or decrease in yo	ur expenses within the yea	r after you file this form?	
				your car loan within the year modification to the terms of y	or do you expect your mortgage rour mortgage?	
	$\overline{\checkmark}$	No.				
		Yes. Explain he	re:			

#### Filed 08/19/16 Entered 08/19/16 13:40:39 Desc Main Case 16-41936-pwb Doc 1 Page 35 of 53 Document

Fill in this inf	ormation to i	dentify your case	:		
Debtor 1	Angel First Name	Romeo Middle Name	<b>Salmon</b> Last Name		
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name		
United States Bar	nkruptcy Court fo	or the: <b>NORTHERN D</b>	ISTRICT OF GEORG	IA	
Case number (if known)					Check if this is an amended filing
Official Form	106Sum				
Summary of	Your Ass	ets and Liabilit	ies and Certain	Statistical	nformation

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Р	art 1: Summarize Your Assets	
		Your assets Value of what you own
1.	Schedule A/B: Property (Official Form 106A/B)	
	1a. Copy line 55, Total real estate, from Schedule A/B	\$90,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$8,400.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$98,400.00
Р	art 2: Summarize Your Liabilities	
		Your liabilities Amount you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$108,840.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$2,422.47
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$12,371.58
	Your total liabilities	\$123,634.05
Р	art 3: Summarize Your Income and Expenses	
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$2,604.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$2,345.00

#### Case 16-41936-pwb Doc 1 Filed 08/19/16 Entered 08/19/16 13:40:39 Desc Main Document Page 36 of 53

Del	btor 1	Angel First Name	Romeo Middle Name	Salmon Last Name	Case number (if known) _	
P	art 4:	Answer T	hese Questions for	r Administrative	and Statistical Records	
6.	Are y	ou filing for ban	kruptcy under Chapter	s 7, 11, or 13?		
	ш.	No. You have no Yes	othing to report on this pa	art of the form. Check	this box and submit this form to the court	with your other schedules.
7.	What	kind of debt do	you have?			
			•		are those "incurred by an individual prima s 8-9g for statistical purposes. 28 U.S.C.	•
			not primarily consumer burt with your other scheen		hing to report on this part of the form. Che	eck this box and submit
8.			of Your Current Monthl Line 11; OR, Form 122B	•	total current monthly income from 22C-1 Line 14.	\$3,017.00
ο.	Conv	the following s	nocial catogories of cla	ime from Part / line	6 of Schedule F/E:	

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim
From Part 4 on Schedule E/F, copy the following:	
9a. Domestic support obligations. (Copy line 6a.)	\$0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$2,422.47
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.00
9d. Student loans. (Copy line 6f.)	\$0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$2,422.47

#### Case 16-41936-pwb Doc 1 Filed 08/19/16 Entered 08/19/16 13:40:39 Desc Main Document Page 37 of 53

		200	samone rago o	
Fill in this inf	ormation to i	dentify your case	:	
Debtor 1	Angel	Romeo	Salmon	
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
(Spouse, il Illing)	First Name	Middle Name	Last Name	
United States Ba	nkruptcy Court fo	or the: <b>NORTHERN D</b>	ISTRICT OF GEORGIA	_
Case number (if known)				Check if this is an amended filing
Official Form	106Dec			<del>_</del>
		ndividual Deht	or's Schedules	12/15
	isonment for up gn Below	to 20 years, or both.	18 U.S.C. §§ 152, 1341, 15	19, and 3571.
Did you pay	or agree to pay s	someone who is NOT	an attorney to help you fi	ll out bankruptcy forms?
<b>☑</b> No				
☐ Yes. N	ame of person			Attach Bankruptcy Petition Preparer's Notice,
_				Declaration, and Signature (Official Form 119).
Under penalt true and corr		eclare that I have read	the summary and schedu	lles filed with this declaration and that they are
X /s/ Angel	Romeo Salmo	on	X	

Signature of Debtor 2

MM / DD / YYYY

Date

Angel Romeo Salmon, Debtor 1

MM / DD / YYYY

Date 08/19/2016

## Case 16-41936-pwb Doc 1 Filed 08/19/16 Entered 08/19/16 13:40:39 Desc Main Document Page 38 of 53

				_	
Fill in this in	formation to	identify your case	:		
Debtor 1	Angel	Romeo	Salmon		
	First Name	Middle Name	Last Name	_	
Debtor 2				_	
(Spouse, if filing	) First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court fo	or the: <b>NORTHERN D</b>	ISTRICT OF GEORGIA	_	
Case number					
(if known)				Check if this is an amended filing	
Official Form	107				
		. A <i>ffa</i> : fa l	inidonala Filimo Com	Danlanantaa	0.444.0
Statement of	of Financia	I Affairs for ind	ividuals Filing for	вапкгиртсу	04/16
	•	nown). Answer every out Your Marital S	tatus and Where You	Lived Before	
1. What is you ☐ Married ☑ Not marr	r current marital	status?			
2. During the la	ast 3 years, have	you lived anywhere o	ther than where you live no	w?	
<b>☑</b> No					
Yes. Lis	t all of the places	you lived in the last 3 y	ears. Do not include where y	ou live now.	
(Community		•	• .	community property state or territory? siana, Nevada, New Mexico, Puerto Rico, Texas,	
<b>☑</b> No					
Yes. Ma	ke sure you fill ou	ut Schedule H: Your Co	debtors (Official Form 106H).		

# Case 16-41936-pwb Doc 1 Filed 08/19/16 Entered 08/19/16 13:40:39 Desc Main Document Page 39 of 53

Debtor 1	Angel First Name	Romeo Middle Name	Salmon Last Name	Case nu	mber (if known)	
Part 2	Explain the	e Sources of Y	our Income			
Fill ir	the total amount o	of income you recei	nent or from operating a buved from all jobs and all bus ncome that you receive toge	inesses, including par		endar years?
	No Yes. Fill in the deta	ails.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions	Sources of income Check all that apply.	Gross income (before deductions and exclusions
	nuary 1 of the curr you filed for bankr	-	<ul><li>☐ Wages, commissions, bonuses, tips</li><li>☐ Operating a business</li></ul>		<ul><li>☐ Wages, commissions, bonuses, tips</li><li>☐ Operating a business</li></ul>	
	ast calendar year: 1 to December 31,	2015 ) YYYY	<ul><li>☐ Wages, commissions, bonuses, tips</li><li>☐ Operating a business</li></ul>		<ul><li></li></ul>	
	alendar year befor		☐ Wages, commissions, bonuses, tips		☐ Wages, commissions, bonuses, tips	
January	. 10 2000111501 01,	YYYY	Operating a business		Operating a business	
Inclu unen and ( Debt	de income regardle nployment; and oth gambling and lotter or 1.	ess of whether that er public benefit pa y winnings. If you a	yments; pensions; rental inc	s of other income are come; interest; dividen ave income that you r	alimony; child support; Socia ds; money collected from lav eceived together, list it only c	vsuits; royalties;

## Case 16-41936-pwb Doc 1 Filed 08/19/16 Entered 08/19/16 13:40:39 Desc Main Document Page 40 of 53

Del	btor 1	Angel	Romeo	Salmon		Case number (if kno	wn)
		First Name	Middle Name	Last Name			
P	Part 3:	List Certai	n Payments You I	Made Before Y	ou Filed for Ba	nkruptcy	
6.	Are eit	her Debtor 1's o	or Debtor 2's debts pri	marily consumer	debts?		
	□ No.		tor 1 nor Debtor 2 has an individual primarily f				d in 11 U.S.C. § 101(8) as
		During the 9	0 days before you filed	for bankruptcy, did	d you pay any credit	or a total of \$6,425*	or more?
		☐ No. Go t	o line 7.				
		tota	below each creditor to al amount you paid that d support and alimony.	creditor. Do not in	nclude payments for	domestic support of	bligations, such as
		* Subject to	adjustment on 4/01/19 a	and every 3 years	after that for cases	filed on or after the o	date of adjustment.
	<b>√</b> Yes	s. Debtor 1 or	Debtor 2 or both have	primarily consur	ner debts.		
	_	During the 9	0 days before you filed	for bankruptcy, did	d you pay any credit	or a total of \$600 or	more?
		☑ No. Go t	o line 7.				
		cre	below each creditor to ditor. Do not include pa o, do not include payme	syments for domes	stic support obligation	ns, such as child su	
7.	Insiders corpora agent, i	s include your re ations of which yo	latives; any general par ou are an officer, directo a business you operato	rtners; relatives of or, person in contr	any general partner ol, or owner of 20%	s; partnerships of working of their votion	e who was an insider?  hich you are a general partner;  ng securities; and any managing  s for domestic support obligations
	Yes	s. List all payme	ents to an insider.				
				Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
	eorge Ca der's name	rruthers		6/27/2016	\$500.00	\$4,000.00	_
. I							
nur	mber Str	eet					

City

State

ZIP Code

# Case 16-41936-pwb Doc 1 Filed 08/19/16 Entered 08/19/16 13:40:39 Desc Main Document Page 41 of 53

Deb	otor 1	Angel First Name	Romeo Middle Name	Salmon Last Name	Case number (if known)
3.					ayments or transfer any property on account of a debt that
			ebts guaranteed or cos	igned by an insider.	
	✓ No ☐ Yes	s. List all payme	nts that benefited an i	nsider.	
Pa	art 4:	Identify Le	gal Actions, Rep	ossessions, and Fo	preclosures
).	List all s		cluding personal injury		any lawsuit, court action, or administrative proceeding? ions, divorces, collection suits, paternity actions, support or custody
	✓ No ☐ Yes	s. Fill in the deta	nils.		
10.	seized,	or levied?	ou filed for bankrupto		perty repossessed, foreclosed, garnished, attached,
	_	Go to line 11.  S. Fill in the info	rmation below.		
11.		-	•	ntcy, did any creditor, in nake a payment becaus	ncluding a bank or financial institution, set off any se you owed a debt?
	✓ No ☐ Yes	s. Fill in the deta	uils.		
12.			•	cy, was any of your pro stodian, or another offic	perty in the possession of an assignee for the benefit of cial?
	✓ No ☐ Yes	3			
Pa	art 5:	List Certai	n Gifts and Cont	ributions	
3.	Within	2 years before	you filed for bankrup	tcy, did you give any gi	ifts with a total value of more than \$600 per person?
	✓ No □ Yes	s. Fill in the deta	ails for each gift.		
14.		2 years before y charity?	you filed for bankrup	tcy, did you give any gi	ifts or contributions with a total value of more than \$600
	✓ No	s. Fill in the deta	ails for each gift or con	tribution.	

#### Case 16-41936-pwb Doc 1 Filed 08/19/16 Entered 08/19/16 13:40:39 Desc Main Document Page 42 of 53

Deb	otor 1	Angel	Romeo	Salmon	Case number (if kn	own)	
		First Name	Middle Name	Last Name			
Pa	art 6:	List Certain	n Losses				
15.		1 year before yo isaster, or gaml		etcy or since you filed for bar	nkruptcy, did you lose anyt	hing because of th	neft, fire,
	☑ No □ Yes	s. Fill in the deta	ils.				
Pa	art 7:	List Certaiı	n Payments or	Transfers			
16.			•	otcy, did you or anyone else kruptcy or preparing a bank		or transfer any pro	perty to
	-	-	_	reparers, or credit counseling		d for your bankrupte	су.
	□ No ☑ Yes	s. Fill in the deta	ils.				
	en Credi	<b>it &amp; Debt Cour</b> /as Paid	nseling	Description and value of ar \$25 by Berry & Associate	• • • •	Date payment or transfer was made	Amount of payment
						8/18/16	\$25.00
Num	nber Str	eet					
City		Sta	ate ZIP Code				
Ema	il or websit	te address					
Pers	on Who M	lade the Payment, if	f Not You				
	Bankru	ptcy Court		Description and value of ar \$310 filing fee advanced on behalf of debtor		Date payment or transfer was made	Amount of payment
reis	on who w	ras Falu		on behalf of debtor		8/18/16	\$310.00
Num	ber Str	eet					
	•						
City		Sta	ate ZIP Code				
Ema	il or websit	te address					

Person Who Made the Payment, if Not You

## Case 16-41936-pwb Doc 1 Filed 08/19/16 Entered 08/19/16 13:40:39 Desc Main Document Page 43 of 53

Deb	tor 1	Angel First Name	Romeo Middle Name	Salmon Last Name	Case number (if known)	
17.	anyone	1 year before y who promised	ou filed for bankrupto	y, did you or anyone els your creditors or to ma	e acting on your behalf pay or transfer any ke payments to your creditors?	property to
	✓ No	s. Fill in the deta	ails.			
18.		-	•	cy, did you sell, trade, o of your business or fina	r otherwise transfer any property to anyone ncial affairs?	e, other than
		-		ade as security (such as ge already listed on this sta	granting of a security interest or mortgage on y atement.	our property).
	✓ No ☐ Yes	s. Fill in the deta	ails.			
19.		-		otcy, did you transfer any illed asset-protection devi	y property to a self-settled trust or similar d ces.)	evice of which
	_	s. Fill in the deta	ails.			
P	art 8:	List Certai	in Financial Acco	unts, Instruments, S	afe Deposit Boxes, and Storage Un	its
20.			ou filed for bankrupto moved, or transferred		counts or instruments held in your name, or	r for your
		-	•	other financial accounts; c tions, and other financial i	ertificates of deposit; shares in banks, credit unstitutions.	nions, brokerage
	✓ No ☐ Yes	s. Fill in the deta	ails.			
21.	-		did you have within 1 rother valuables?	year before you filed for	bankruptcy, any safe deposit box or other of	depository
	✓ No ☐ Yes	s. Fill in the deta	ails.			
22.	<b>☑</b> No	ou stored propose. Fill in the deta		or place other than your	home within 1 year before you filed for ban	kruptcy?
Pa	art 9:	Identify Pr	operty You Hold	or Control for Some	one Else	
23.	-	nold or contro		meone else owns? Incli	ude any property you borrowed from, are st	coring for,
	□ No ☑ Yes	s. Fill in the deta	ails.			
			Where	e is the property?	Describe the property	Value
	cy Saln er's Name				2008 Pontiac G8	
Num	ber Str	reet	Numbe	er Street		
City		State	7IP Code City	State 7	P Code	

# Case 16-41936-pwb Doc 1 Filed 08/19/16 Entered 08/19/16 13:40:39 Desc Main Document Page 44 of 53

D = b	44	Angol	Romeo	Salmon	Construction (Alexandr)
Deb	tor 1	Angel First Name	Middle Name	Last Name	Case number (if known)
Pa	art 10:	Give Deta	ails About Environr	mental Informatio	วท
For	the purp	ose of Part 1	0, the following definition	ons apply:	
r	nazardou	ıs or toxic su	bstance, wastes, or ma	terial into the air, lan	egulation concerning pollution, contamination, releases of and, soil, surface water, groundwater, or other medium, substances, wastes, or material.
		-	on, facility, or property n, operate, or utilize it,		y environmental law, whether you now own, operate, or ites.
			neans anything an envir material, pollutant, cor		s as a hazardous waste, hazardous substance, toxic item.
Rep	ort all n	otices, releas	es, and proceedings th	at you know about, r	egardless of when they occurred.
24.	Has any law?	y government	tal unit notified you that	you may be liable o	r potentially liable under or in violation of an environmental
	✓ No ☐ Yes	s. Fill in the de	etails.		
25.	☑ No	ou notified and	y governmental unit of etails.	any release of hazar	dous material?
26.	Have you	•	ty in any judicial or adn	ninistrative proceedi	ing under any environmental law? Include settlements and
	✓ No ☐ Yes	s. Fill in the de	etails.		
Pa	art 11:	Give Deta	ails About Your Bu	siness or Connec	ctions to Any Business
27.	Within 4	-	e you filed for bankrupt	cy, did you own a bu	usiness or have any of the following connections to any
		A member of A partner in An officer, di	ietor or self-employed in f a limited liability compa a partnership irector, or managing exec at least 5% of the voting	ny (LLC) or limited liab	
	ب		above applies. Go to Pa at apply above and fill in		each business.
28.		-	e you filed for bankrupt ons, creditors, or other		nancial statement to anyone about your business? Include
	□ No □ Yes	s. Fill in the de	etails below.		

## Case 16-41936-pwb Doc 1 Filed 08/19/16 Entered 08/19/16 13:40:39 Desc Main Document Page 45 of 53

Debtor 1	Angel	Romeo	Salmon	Case number (if known)
	First Name	Middle Name	Last Name	
Part 12	Sign Belov	N		
that answ property b	ers are true and one oy fraud in conne	correct. I understand	that making a false state	tachments, and I declare under penalty of perjury ement, concealing property, or obtaining money or es up to \$250,000, or imprisonment for up to 20 years,
X /s/ Ang	gel Romeo Salr	non	x	
Angel F	Romeo Salmon, D	ebtor 1	Signature of Deb	tor 2
Date	08/19/2016	-	Date	
Did you at	ttach additional p	pages to Your Stateme	nt of Financial Affairs fo	r Individuals Filing for Bankruptcy (Official Form 107)?
✓ No ☐ Yes				
Did you pa	ay or agree to pa	y someone who is not	an attorney to help you	fill out bankruptcy forms?
<b>√</b> No				
_	Name of person _			Attach the Bankruptcy Petition Preparer's Notice,
				Declaration, and Signature (Official Form 119).

Case 16-41936-pwb Doc 1 Filed 08/19/16 Entered 08/19/16 13:40:39 Desc Main Document Page 46 of 53

B2030 (Form 2030) (12/15)

#### UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF GEORGIA ROME DIVISION

In	re Angel Romeo Salmon		Case No.	
			Chapter	13
	DISCLOSUR	E OF COMPENSATION OF A	TTORNEY FOI	R DEBTOR
1.	that compensation paid to me w	and Fed. Bankr. P. 2016(b), I certify that ithin one year before the filing of the petiered on behalf of the debtor(s) in contem	tion in bankruptcy, or	agreed to be paid to me, for
	For legal services, I have agree	d to accept		3,700.00
	Prior to the filing of this stateme	nt I have received		\$0.00
	Balance Due			3,700.00
2.	The source of the compensation	n paid to me was:		
	✓ Debtor	Other (specify)		
3.	The source of compensation to	be paid to me is:		
	☑ Debtor	Other (specify)		
4.	I have not agreed to share associates of my law firm.	the above-disclosed compensation with a	any other person unle	ess they are members and
		above-disclosed compensation with anoth A copy of the agreement, together with a		
5.	In return for the above-disclosed	d fee, I have agreed to render legal servi	ce for all aspects of the	ne bankruptcy case, including:
	Analysis of the debtor's finant bankruptcy;	cial situation, and rendering advice to the	e debtor in determinir	ng whether to file a petition in
	b. Preparation and filing of any	petition, schedules, statements of affairs	and plan which may	be required;
	c. Representation of the debtor	at the meeting of creditors and confirma	tion hearing, and any	adjourned hearings thereof;
	d. [Other provisions as needed]			
	Stop creditor actions against Pre confirmation Motion to Ex Response to Pre-confirmation Employer Deduction Order Lien avoidances necessary to Modification necessary to con Objections to claims necessary objections to late-filed claims Bar Date reviews of claims, file Changes of address	tend or Impose Stay Motion for Relief from Stay confirm Plan firm Plan ry to confirm Plan	dings	

#### Case 16-41936-pwb Doc 1 Filed 08/19/16 Entered 08/19/16 13:40:39 Desc Main Document Page 47 of 53

B2030 (Form 2030) (12/15)

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

Motion to Retain (\$450)

Amend or Modify schedules (\$300)

Plan Modification (\$300)

Lien Avoidance (\$300)

Objection to Claim (\$350)

Resolving Motion for Relief from Stay (\$450)

Motion to Suspend of Excuse Plan Payments (\$350)

Motion to Sell Property (\$500)

Motion to Compromise Claim (\$500)

Application to Employ Professional (\$400)

Motion to Refinance Property or Motion to Incur (\$500)

**Resolving Motions to Dismiss (\$350)** 

Resolving Creditor or Trustee Motions to Modify Plan (\$150)

Motion to Sever or Dismiss as to one joint Debtor (\$300)

Motion to Reopen or to Vacate Dismissal Order (\$500)

Motion to Reimpose Stay (\$500)

Adversary Proceeding (\$375/hour)

Miscellaneous Action (\$400)

- 7. If this is a Chapter 13 proceeding, I certify that I have provided the debtor with the statement entitled "Rights and Responsibilities".
- 8. In addition to the attorney fees agreed upon above, Berry & Associates seeks an additional \$378.00 advanced to the Debtor for filing, credit report and counseling, and tax transcript fees.
- 9. In addition to the overall fee structure, in the event that the case is dismissed or converted to a chapter 7 proceeding the chapter 13 trustee shall deliver to Debtor's Counsel the unpaid amount of the agreed upon fees up to:
- (i) \$2,000.00 upon a pre-confirmation conversion or dismissal;
- (ii) the allowed fees upon a post-confirmation conversion or dismissal

#### **CERTIFICATION**

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding. Pursuant to General Order No. 9, I certify that I provided to the Debtor a copy of the "Rights and Responsibilities Statement Between Chapter 13 Debtors and Their Attorneys".

08/19/2016	/s/ Matthew T. Berry	
Date	Matthew T. Berry Berry & Associates	Bar No. 055663
	2751 Buford Hwy	
	Suite 600	
	Atlanta, GA 30324	
	Phone: (404) 235-3300 / Fax: (4	404) 235-3333

1st Franklin Financial 127 WC Bryant Pkwy Ste D Calhoun, GA 30701

Afni 1310 Martin Luther King Dr Bloomington, IL 61701

Capital One PO Box 30285 Salt Lake City, UT 84130

Chase Mtg P.o. Box 24696 Columbus, OH 43224

Cit Fin Serv Attn: Bankruptcy 1000 Technology Dr O'Fallon, MO 63368

Convergent Outsoucing, Inc PO Box 9004 Renton, WA 98057

Georgia Department of Revenue Bankruptcy Unit 1800 Century Blvd, NE, Ste 17200 Atlanta, GA 30345

Gordon County Board of Assessors PO Box 533 Calhoun, GA 30703-0533

Kohls/Capital One PO Box 3120 Milwaukee, WI 53201 Market St Mg 2650 Mccormick Dr Ste 20 Clearwater, FL 33759

Onemain Financial/Citifinancial 6801 Colwell Blvd NTSB-2320 Irving, TX 75039

Santander Consumer USA PO Box 961245 Fort Worth, TX 76161

Select Portfolio Servicing, Inc PO Box 65250 Salt Lake City, UT 84165

Select Portfolio Servicing, Inc. Attn: General Correspondence PO Box 65250 Salt Lake City, UT 84165-0250

# Case 16-41936-pwb Doc 1 Filed 08/19/16 Entered 08/19/16 13:40:39 Desc Main Document Page 50 of 53

	ill in this inf	ormation to ider	ntify your case:		Check as	directed in lines 17 and 21:
D	ebtor 1	Angel First Name	Romeo Middle Name	Salmon Last Name	According to Statement:	the calculations required by this
	Debtor 2	First Name	Middle Nove	LastNama		ble income is not determined I U.S.C. § 1325(b)(3).
`	Spouse, if filing)		Middle Name	Last Name	2. Disposa	ble income is determined
"	Inited States Bai	nkruptcy Court for the	e: <u>NORTHERN DI</u>	ISTRICT OF GEORGIA	— II	1 U.S.C. § 1325(b)(3).
	Case number f known)					nmitment period is 3 years. nmitment period is 5 years.
	· 				L 4. The con	militient period is 5 years.
Of	fficial Form	122C-1			☐ Check if t	nis is an amended filing
		Statement of `tion of Comm		t Monthly Incom	е	12/1
		Iculate Your Ave		ncome	ise number (ii knowi	
1.	What is your	marital and filing sta	atus? Check one o	nly.		
	<b>⊘</b> Not mar	ried. Fill out Column	A, lines 2-11.			
	☐ Married.	Fill out both Column	is A and B, lines 2-	11.		
	bankruptcy c August 31. If in the result.	ase. 11 U.S.C. § 10 the amount of your m	1(10A). For examp	ole, if you are filing on Sep	tember 15, the 6-mon dd the income for all 6	nonths before you file this h period would be March 1 through months and divide the total by 6. Fill he same rental property, but the
	income from t			nave nothing to report for a	any line, write \$0 in the	
	income from t				Column A  Debtor 1	
2.	Your gross w		olumn only. If you h	nave nothing to report for a	Column A	e space.  Column B  Debtor 2 or
2.	Your gross w (before all pay	hat property in one co rages, salary, tips, b rroll deductions).	olumn only. If you h	nave nothing to report for a	Column A Debtor 1 \$3,017.00	e space.  Column B  Debtor 2 or
3.	Your gross w (before all pay Alimony and All amounts f expenses of regular contrib your depende	rages, salary, tips, by roll deductions). maintenance paymer from any source whyou or your dependentions from an unma	conuses, overtime, ents. Do not including the are regularly pents, including chiuried partner, membranes. Do not including the	and commissions  le payments from a spous laid for household lild support. Include bers of your household, clude payments from a	Column A Debtor 1 \$3,017.00	e space.  Column B  Debtor 2 or
3. 4.	Your gross w (before all pay Alimony and All amounts to expenses of y regular contrib your depende spouse. Do n	rages, salary, tips, by roll deductions). maintenance paymer from any source whyou or your dependentions from an unmants, parents, and rook	conuses, overtime, ents. Do not including the are regularly pents, including chiuried partner, membranes. Do not including united on line 3.	and commissions  le payments from a spous laid for household lid support. Include bers of your household, clude payments from a	Column A Debtor 1 \$3,017.00 e. \$0.00	e space.  Column B  Debtor 2 or
	Your gross w (before all pay Alimony and All amounts to expenses of y regular contrib your depende spouse. Do n	rages, salary, tips, by roll deductions). maintenance paymer from any source whyou or your dependentions from an unmants, parents, and room ot include payments	conuses, overtime, ents. Do not including chi, including chi, irried partner, membranes. Do not including chi irried partner, membranes. Do not including chi irried partner, membranes, profession, Debtor 1	and commissions  le payments from a spous laid for household lid support. Include bers of your household, clude payments from a	Column A Debtor 1 \$3,017.00 e. \$0.00	e space.  Column B  Debtor 2 or
3. 4.	Your gross w (before all pay Alimony and All amounts to expenses of y regular contrib your depende spouse. Do n	rages, salary, tips, by roll deductions). maintenance payments from any source whyou or your dependentions from an unmaints, parents, and room of include payments from operating a bus	conuses, overtime, ents. Do not including the are regularly pents, including chiuried partner, member mates. Do not including the policy ou listed on line 3.	and commissions  le payments from a spous laid for household lild support. Include bers of your household, clude payments from a	Column A Debtor 1 \$3,017.00 e. \$0.00	e space.  Column B  Debtor 2 or
3. 4.	Your gross w (before all pay Alimony and All amounts t expenses of y regular contrib your depende spouse. Do n Net income for Gross receipts deductions)	rages, salary, tips, by roll deductions). maintenance payments from any source whyou or your dependentions from an unmaints, parents, and room of include payments from operating a bus	conuses, overtime, ents. Do not including chi, including chi, irried partner, membranes. Do not including chi irried partner, membranes. Do not including chi irried partner, membranes, profession, Debtor 1	and commissions  le payments from a spous laid for household lild support. Include bers of your household, clude payments from a	Column A Debtor 1  \$3,017.00  \$0.00	e space.  Column B  Debtor 2 or

# Case 16-41936-pwb Doc 1 Filed 08/19/16 Entered 08/19/16 13:40:39 Desc Main Document Page 51 of 53

Deb	tor 1	Angel First Name	Romeo Middle Name	Salmon Last Name	C	Case number (if k	nown)				
						Column A  Debtor 1	Column B Debtor 2 or non-filing spouse				
6.	Net	income from rental and	d other real proper	ty							
			Debtor 1	Debtor 2							
		ss receipts (before all uctions)	\$	<u> </u>	_						
	Ordi	nary and necessary ope enses	rating — \$	60.00	— Copy						
		monthly income from rear r real property	ntal or <b>\$</b>	60.00	here	\$0.00					
7.	Inte	rest, dividends, and ro	yalties			\$0.00					
8.	Une	mployment compensation	tion			\$0.00					
		not enter the amount if your serit under the Social Sec									
	F	or you		\$	0.00						
		or your spouse									
9.		sion or retirement inco a benefit under the Soc		any amount received the	nat	\$0.00					
11.	Tota Calc	arate page and put the to all amounts from separate culate your total average lines 2 through 10 for ea an add the total for Colum	e pages, if any. ge monthly income ach column.			\$3,017.00	+=	40,011100			
		<u></u>						Total average monthly income			
Pa	art 2	Determine Ho	w to Measure Y	our Deductions fr	om Income	9					
12.	Сор	y your total average m	onthly income fror	n line 11				\$3,017.00			
13.	Cald	culate the marital adjus	tment. Check one	:							
		You are married. Fill in 0 below. You are married and your spouse is filing with you. Fill in 0 below. You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page.  If this adjustment does not apply, enter 0 below.									
					_						
					- _+						
		Total				\$0.00 Cop	y here 👈	\$0.00			
14.	You	r current monthly inco	me. Subtract the to	otal in line 13 from line 1	2.			\$3,017.00			

## Case 16-41936-pwb Doc 1 Filed 08/19/16 Entered 08/19/16 13:40:39 Desc Main Document Page 52 of 53

Deb	otor 1	Angel First Name	Romeo Middle Name		mon Name		Case number (if known) _				
15.	Calcu		monthly income for			ese steps:					
	15a.	Copy line 14 here							\$3	,017.00	
			by 12 (the number of m						X	12	
	15b.	b. The result is your current monthly income for the year for this part of the form.								,204.00	
16.		L									
		Fill in the state in				Georgia					
	16b.	Fill in the number	of people in your hous	sehold.		2					
	16c.									,854.00	
		To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.									
17.	How	How do the lines compare?									
	17a.	'a. Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, Disposable income is not determined under 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NOT fill out Calculation of Your Disposable Income (Official Form 122C-2).									
	17b.	Tb. Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, <i>Disposable income is determined under</i> 11 U.S.C. § 1325(b)(3). Go to Part 3 and fill out Calculation of Your Disposable Income (Official Form 122C-2). On line 39 of that form, copy your current monthly income from line 14 above.									
P	art 3:	Calculate \	our Commitmen	t Period	Under	11 U.S.C. § 1	325(b)(4)				
18.	Сору	your total averag	e monthly income fro	om line 11					\$3	,017.00	
19.	Deduct the marital adjustment if it applies. If you are married, your spouse is not filing with you, and you contend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13.										
	19a.	If the marital adju	stment does not apply	, fill in 0 or	n line 19a					\$0.00	
	19b.	Subtract line 19a	a from line 18.					[	\$3	,017.00	
20.	. Calculate your current monthly income for the year. Follow these steps:										
	20a.	Copy line 19b							\$3	,017.00	
		Multiply by 12 (the	e number of months in	a year).				,	Х	12	
	20b.	The result is your	current monthly incom	ne for the y	ear for th	s part of the forr	n.		\$36	,204.00	
	20c.	Copy the median	family income for your	state and	size of ho	ousehold from lin	ne 16c		\$53	,854.00	
21.	How	do the lines comp	pare?								
			an line 20c. Unless oth commitment period is 3				top of page 1 of this form,				
	_		nan or equal to line 200 box 4, <i>The commitme</i>				court, on the top of page 1				

#### Case 16-41936-pwb Doc 1 Filed 08/19/16 Entered 08/19/16 13:40:39 Desc Main Document Page 53 of 53

Debtor 1	Angel First Name	Romeo Middle Name	Salmon Last Name	Case number (if known)		
Part 4:	Sign Belov		Lactivamo			
By sig	ning here, under	penalty of perjury I decl	are that the information	on this statement and in any attachments is true and correct.		
χ <u>/s/</u>	Angel Romeo	Salmon		X	_	
An	ngel Romeo Salmon, Debtor 1			Signature of Debtor 2		
Da	te <b>8/19/2016</b>			Date		
	MM / DD / YY	^^/		MM / DD / YYYY		

If you checked 17a, do NOT fill out or file Form 122C-2.

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.